
State: Illinois **Filing Company:** NORCAL Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations
Product Name: IL - Increased Limit Factor
Project Name/Number: IL - ILF Addition 06/2014/IL - ILF Addition 06/2014

Filing at a Glance

Company: NORCAL Mutual Insurance Company
Product Name: IL - Increased Limit Factor
State: Illinois
TOI: 11.2 Med Mal-Claims Made Only
Sub-TOI: 11.2000 Med Mal Sub-TOI Combinations
Filing Type: Rate/Rule
Date Submitted: 06/26/2014
SERFF Tr Num: NCMC-129612549
SERFF Status: Closed-Filed
State Tr Num:
State Status:
Co Tr Num: IL14028

Effective Date 07/01/2014
Requested (New):
Effective Date 07/01/2014
Requested (Renewal):
Author(s): Jane Cundiff
Reviewer(s): Gayle Neuman (primary)
Disposition Date: 06/30/2014
Disposition Status: Filed
Effective Date (New): 07/01/2014
Effective Date (Renewal): 07/01/2014

State Filing Description:

State: Illinois **Filing Company:** NORCAL Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations
Product Name: IL - Increased Limit Factor
Project Name/Number: IL - ILF Addition 06/2014/IL - ILF Addition 06/2014

General Information

Project Name: IL - ILF Addition 06/2014
Project Number: IL - ILF Addition 06/2014
Reference Organization:
Reference Title:
Filing Status Changed: 06/30/2014
State Status Changed:
Created By: Jane Cundiff
Corresponding Filing Tracking Number:

Status of Filing in Domicile:
Domicile Status Comments:
Reference Number:
Advisory Org. Circular:

Deemer Date:
Submitted By: Jane Cundiff

Filing Description:

NORCAL Mutual Insurance Company would like to offer an increased limit of \$2M/\$10M to our insured entities in the state of Illinois. The new rate manual page with the corresponding rule has been attached as has the rate manual page with changes highlighted in red. We updated the edition date of the manual as well to 06/2014.

Please let us know if we can provide any further documentation.
Thank you

Company and Contact

Filing Contact Information

Jane Cundiff, Regulatory Compliance Analyst
6034 West Courtyard Drive
Suite 310
Austin, TX 78730
jcundiff@medicusins.com
512-879-5128 [Phone]

Filing Company Information

NORCAL Mutual Insurance Company	CoCode: 33200	State of Domicile: California
560 Davis Street	Group Code: 1282	Company Type: Commercial
Suite 200	Group Name: Med Grp Holdings & Aff	Medical Malpractice
San Francisco, CA 94111	FEIN Number: 94-2301054	State ID Number:
(800) 652-1051 ext. 2101[Phone]		

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: Yes

Company	Amount	Date Processed	Transaction #
NORCAL Mutual Insurance Company	\$50.00	06/26/2014	83505746

State:	Illinois	Filing Company:	NORCAL Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations		
Product Name:	IL - Increased Limit Factor		
Project Name/Number:	IL - ILF Addition 06/2014/IL - ILF Addition 06/2014		

State Specific

Refer to our checklists prior to submitting filing (http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp): OK

Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: OK

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. :

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp .: OK

Medical Malpractice rates/rules may now be submitted using SERFF effective January 1, 2012.: OK

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.": OK

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: OK

State:	Illinois	Filing Company:	NORCAL Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations		
Product Name:	IL - Increased Limit Factor		
Project Name/Number:	IL - ILF Addition 06/2014/IL - ILF Addition 06/2014		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Gayle Neuman	06/30/2014	06/30/2014

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Gayle Neuman	06/27/2014	06/27/2014

Response Letters

Responded By	Created On	Date Submitted
Jane Cundiff	06/27/2014	06/27/2014

State:	Illinois	Filing Company:	NORCAL Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations		
Product Name:	IL - Increased Limit Factor		
Project Name/Number:	IL - ILF Addition 06/2014/IL - ILF Addition 06/2014		

Disposition

Disposition Date: 06/30/2014
Effective Date (New): 07/01/2014
Effective Date (Renewal): 07/01/2014
Status: Filed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Explanatory Memorandum		Yes
Supporting Document	Form RF3 - (Summary Sheet)		Yes
Supporting Document	Certification		Yes
Supporting Document	Manual		Yes
Supporting Document	Request to Maintain Data as Trade Secret Information		Yes
Rate	Illinois Rate/Rule Manual 06/2014		Yes

State: Illinois **Filing Company:** NORCAL Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations
Product Name: IL - Increased Limit Factor
Project Name/Number: IL - ILF Addition 06/2014/IL - ILF Addition 06/2014

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	06/27/2014
Submitted Date	06/27/2014
Respond By Date	07/04/2014

Dear Jane Cundiff,

Introduction:

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Please indicate if your company has a plan for the gathering of statistics or the reporting of statistics to statistical agencies? If yes, what stat agency is being used?

Conclusion:

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,

Gayle Neuman

State: Illinois **Filing Company:** NORCAL Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations
Product Name: IL - Increased Limit Factor
Project Name/Number: IL - ILF Addition 06/2014/IL - ILF Addition 06/2014

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	06/27/2014
Submitted Date	06/27/2014

Dear Gayle Neuman,

Introduction:

Response 1

Comments:

NORCAL is committed to adhering to any governmentally required statistical reporting outlet. At this time, NORCAL will maintain its own plan for statistical reporting of medical malpractice data.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Please let us know if you need any further information.

Thank you.

Sincerely,

Jane Cundiff

State:	Illinois	Filing Company:	NORCAL Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations		
Product Name:	IL - Increased Limit Factor		
Project Name/Number:	IL - ILF Addition 06/2014/IL - ILF Addition 06/2014		

Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		Illinois Rate/Rule Manual 06/2014	Section I-4, XIII.	Replacement	NCMC-129207841	IL Manual 06-2014 (Section I-4, XIII).pdf

XIII. LIMITS OF LIABILITY

The Basic Limits of Liability are \$1,000,000 per claim/\$3,000,000 annual aggregate. Credits and/or debits apply only to the \$1M/\$3M layer of the Limits of Liability

Individual Limits of Liability will be modified by the Increased Limits factor as applicable for the respective insureds and used to develop the applicable premium.

Liability Limit Factors			
Limits	Physicians	Surgeons	Entity
\$500K/\$1M	0.719	0.719	N/A
\$1M/\$3M	1.00	1.00	N/A
\$2M/\$4M	1.36	1.55	N/A
\$3M/\$5M	1.52	1.73	N/A
\$2M/\$10M	N/A	N/A	1.560

XIV. PRIOR ACTS COVERAGE

The policy shall be extended to provide prior acts coverage in accordance with the applicable retroactive date(s). The retroactive date can be advanced only at the request or with the written acknowledgment of the Insured, subject to underwriting.

XV. EXTENDED REPORTING PERIOD COVERAGE

The availability of Extended Reporting Period Coverage shall be governed by the terms and conditions of the policy and the following rules:

- A. The retroactive date of coverage will determine the years of prior exposure for Extended Reporting Period Coverage.
- B. The Limits of Liability may not exceed those afforded under the terminating policy, unless otherwise required by statute or regulation.
- C. The premium for the Extended Reporting Endorsement shall be the following Extended Reporting Endorsement rating factors applied to the premium found in Section III:

State:	Illinois	Filing Company:	NORCAL Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2000 Med Mal Sub-TOI Combinations		
Product Name:	IL - Increased Limit Factor		
Project Name/Number:	IL - ILF Addition 06/2014/IL - ILF Addition 06/2014		

Supporting Document Schedules

Satisfied - Item:	Explanatory Memorandum
Comments:	Please see the Filing Description under the General Information Tab.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Form RF3 - (Summary Sheet)
Bypass Reason:	Not a rate revision.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Certification
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Manual
Comments:	Please see the attached.
Attachment(s):	IL Manual 06-2014 (Section I-4, XIII)_Changes Tracked.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Request to Maintain Data as Trade Secret Information
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

XIII. LIMITS OF LIABILITY

The Basic Limits of Liability are \$1,000,000 per claim/\$3,000,000 annual aggregate. Credits and/or debits apply only to the \$1M/\$3M layer of the Limits of Liability

Individual Limits of Liability will be modified by the Increased Limits factor as applicable for the respective insureds and used to develop the applicable premium.

Liability Limit Factors			
Limits	Physicians	Surgeons	Entity
\$500K/\$1M	0.719	0.719	<u>N/A</u>
\$1M/\$3M	1.00	1.00	<u>N/A</u>
\$2M/\$4M	1.36	1.55	<u>N/A</u>
\$3M/\$5M	1.52	1.73	<u>N/A</u>
<u>\$2M/\$10M</u>	<u>N/A</u>	<u>N/A</u>	<u>1.560</u>

Formatted Table

XIV. PRIOR ACTS COVERAGE

The policy shall be extended to provide prior acts coverage in accordance with the applicable retroactive date(s). The retroactive date can be advanced only at the request or with the written acknowledgment of the Insured, subject to underwriting.

XV. EXTENDED REPORTING PERIOD COVERAGE

The availability of Extended Reporting Period Coverage shall be governed by the terms and conditions of the policy and the following rules:

- A. The retroactive date of coverage will determine the years of prior exposure for Extended Reporting Period Coverage.
- B. The Limits of Liability may not exceed those afforded under the terminating policy, unless otherwise required by statute or regulation.
- C. The premium for the Extended Reporting Endorsement shall be the following Extended Reporting Endorsement rating factors applied to the premium found in Section III: